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Substitute for form 1449A&B/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT					
(use as many sheets as necessary)					
Sheet	1	of	1		
Application Number	10/041,783				
Filing Date	October 18, 2001				
First Named Inventor	Singhal, Naresh C.				
Art Unit	2155				
Examiner Name	Shabana Qureshi LAZARO, D.				
Attorney Docket Number	010327-003000US				

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document
		Number	Kind Code ² (if known)		
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Examiner Signature	<i>Don Jr</i>	Date Considered	10/25/2005
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.